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City State Zip Code Contact Phone: Contact Email: Claim Number (if known): **Date Claim Filed:** (mm/dd/yyyy) **Total Amount of Claim Filed:** Part 2: Sign Below I, the undersigned, am the above-referenced creditor, or an authorized signatory for the above-referenced creditor. I hereby withdraw the above-referenced claim and authorize the Clerk of this Court, or their duly appointed Claims The person completing this form Agent, to reflect this withdrawal on the official claims register for the above referenced Debtor. must sign and date it. Executed on date (mm/dd/yyyy) Signature Print Name

DEFINITIONS

Debtor: The person, corporation, or other entity that has filed a bankruptcy case is called the debtor.

Title (if applicable)

Creditor: A creditor is any person, corporation, or other entity to which the debtor owed a debt.

Proof of Claim: A form filed with the clerk of the bankruptcy court where the bankruptcy case was filed, to tell the bankruptcy court how much the debtor owed a creditor (the amount of the creditor's claim).

Completed claim withdrawal forms can be sent to the following address:

JOANN Inc. (2025) Claims Processing Center c/o Kroll Restructuring Administration LLC 850 Third Avenue, Suite 412 Brooklyn, NY 11232

Or by email to:

Joann2025Info@ra.kroll.com